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## UTILITY PATENT APPLICATION **TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	ESST-02701		
First Inventor	Andrew Martin Mallinson		
Title	Improved Voltage Segmenta Digital to Analog		
Express Mail Label No.	EV433206269		

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		ION ELEMENTS ning utility patent application contents.	ADDRESS TO: Commis	op Patent Application ssioner for Patents ox 1450 dria VA 22313-1450		
2. Applicar See 37 ( Specific (preferred Descrip Cross F Stateme Referer or a cor Backgrd Brief St Brief St	an original and a int claims small CFR 1.27. cation ad arrangement sective title of the interference to Relatent Regarding Face to sequence Imputer program Is ound of the Invenummary of the Invenummary of the Ind d Description	[Total Pages8]  It forth below)  vention  Ited Applications  Ited sponsored R & D  Isting, a table,  sting appendix  tion  vention	ii. Paper	pendix) id Sequence Submission ble Form (CRF)		
Abstrac  4.	et of the Disclosur g(s) (35 U.S.C. aration dy executed (or y from a prior al continuation/div DELETION OF gined statement a ame in the prior a .63(d)(2) and 1.33	[Total Sheets]  [Total Sheets]  [Interpolation (37 CFR 1.63(d))  [Interpolation (37 CFR	9. Assignment Papers (co. 37 CFR 3.73(b) Stater (when there is an assignment II. Information Disclosure Statement (IDS)/PTO-Preliminary Amendme 14. Return Receipt Postca (Should be specifically Certified Copy of Prior (if foreign priority is classing for its equivalent of its equivalent.  17. Other:	cover sheet & document(s)) ment Power of ignee) Attorney ocument (if applicable) e Copies of IDS -1449 Citations ent ard (MPEP 503) y itemized) rity Document(s) aimed) est under 35 U.S.C. 122 must attach form PTO/SB/35		
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:  Continuation  Divisional  Continuation-in-part (CIP)  of prior application No.:  Prior application information:  Examiner  For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.						
19. CORRESPONDENCE ADDRESS						
	er Number:	34051	OR Cor	respondence address below		
Name S	Name Stevens Law Group					
Address	P.O. Box 1667					
City S	San Jose		State CA	Zip Code 95109		
Country USA Tele		elephone 408-288-7588	Fax 408-288-7542			
Name (Print/Type) David R. Stevens Registration No. (Attorney/Agent) 38,626						
Signature				Date March 26, 2004		

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TEE TO A NOMITTAL	Complete if Known	
FEE TRANSMITTAL	Application Number	
for FY 2004	Filing Date	3/24/04
Effective 10/01/2003. Patent fees are subject to annual revision.	First Named Inventor	Andrew Martin Hallinson
	Examiner Name	
Applicant claims small entity status. See 37 CFR 1.27	Art Unit	
TOTAL AMOUNT OF PAYMENT (\$) 906. ∞	Attorney Docket No.	ESST. 02761

Check   Credit card   Money   Other   Other   Money   Other	TOTAL AMOUNT OF PATIMENT (\$) 100.55	Attorney Docket No.   ESST - 02 + 01			
Deposit Account	METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)			
Deposit Account		3. ADDITIONAL FEES			
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Code (s)					
Number Deposit		Code (\$) Code (\$)			
Account Name The Director is authorized to: (check all that apply) Charge fee(s) indicated below Credit any overpayments Charge fee(s) indicated below Credit any overpayments Charge fee(s) indicated below waxeept for the filling fee to the above-identified deposit account.  FEE CALCULATION 1. BASIC FILING FEE Large Ergs Fee Pergonal Ergs Fee Paid Code (\$) 1001 770 2001 385 Utility filing fee 1002 340 2002 170 Design filing fee 1003 530 2003 265 Plant filing fee 1004 770 2004 385 Resissue filing fee 1004 770 2004 385 Resissue filing fee 1005 80 Provisional filing fee 1005 80 Provisional filing fee 1006 1001 770 2004 385 Resissue filing fee 1007 800 800 Provisional filing fee 1008 800 Provisional filing fee 1009 8	Number	1 1 <del>1</del> 1			
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Fee Fee Code (\$)  1202 18 2202 9 Claims in excess of 20  1201 86 2201 43 Independent claims in excess of 3  1203 290 2203 145 Multiple dependent claim, if not paid 1204 86 2204 43 **Reissue independent claims over original patent over original patent 1205 18 2205 9 **Reissue claims in excess of 20 and over original patent 1205 18 2205 9 **Reissue claims in excess of 20 and over original patent 1205 18 2205 9 **Reissue claims in excess of 20 and over original patent 1205 18 2205 9 **Reissue claims in excess of 20 and over original patent 1205 18 2205 9 **Reissue claims in excess of 20 and over original patent 1205 18 2205 9 **Reissue claims in excess of 20 and over original patent 1205 18 2205 9 **Reissue claims in excess of 20 and over original patent 1205 1802 900 Request for expedited examination of a design application 1205 1802 900 Request for expedited examination of a design application 1205 1802 905 Reduced by Basic Filing Fee Paid 1205 1805 1805 1805 1805 1805 1805 1805 18		,,,			
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1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent  SUBTOTAL (2) (\$) (\$)  **or number previously paid, if greater; For Reissues, see above  SUBMITTED BY  Registration No. (Altorney/Agent)		1			
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SUBTOTAL (2) (\$) \$\psi\$ *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) \$\langle 30.00 \$\langle\$  SUBMITTED BY  Registration No. (Attorney/Agent) 38, 616 Telephone 408.28.7588					
**or number previously paid, if greater; For Reissues, see above SUBMITTED BY  Name (Print/Type)  Preduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 130.60  (Complete (if applicable))  Registration No. (Attorney/Agent)  Registration No. (Attorney/Agent)  Registration No. (Attorney/Agent)  **Telephone 408.28.7588	SURTOTAL (2) (\$)				
Name (Print/Type)  David & Stevens  Registration No. (Attorney/Agent)  38, 616  Telephone 408.28.7588	` '	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 130.00			
Name (Printingle) David Kateries (Attorney/Agent) 58, 616 Telephone 908.08. 1388	SUBMITTED BY (Complete (if applicable))				
	Name (Print/Type) David Restaurs	Registration No. 38, 616 Telephone 478.28.7588			
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